-											-			
PATENT APPLICATION FEE DETERMINATION R Effective December 8, 2004							RI	ECORD	Application or Docket Number					
		CLAIM		AS FILED - PART I (Column 1) (Column 2)				SMALL TYPE					THAN	
L	S. NATION	AL STAGE FEE	s			(00.02)		RAT	F	FEE				
В	ASIC FEE		SMALL	ENT. = \$ 150	V	ARGE ENT. = \$ 30	,	BASIC FE	 {			RATE		FEE
E	KAMINATION	FEE		T Article 33(1)- \$ 50 / \$ 100	AI	other situations		EXAM. FE			\dashv	R BASIC FEE		300
SEARCH FEE			U.S. is ISA ALL other	= \$ 50 / \$ 100 r countries = 0 / \$ 400	Al	\$ 100 / \$ 200 other situations = \$ 250 / \$ 500	1	SEARCH F		 -	-	EXAM. FEE		200
FE	E FOR EXTR	A SPEC. PGS.		ninus 100 =		/50 =	\dashv	X \$ 125	-		-		_	400
TC	TAL CHARGE	EABLE CLAIMS	7	minus 20 =			\dashv	X \$ 25			٦,	X \$ 250	\dashv	
INI	DEPENDENT	CLAIMS	3	minus 3 =			\dashv	X \$ 100			OF	-		
ML	LTIPLE DEPE	ENDENT CLAIM F	PRESENT		· 		\dashv	+ \$ 180			OF			
* 1	f the differen	ce in column 1	is less than ze	ero, enter "0"	' in c	column 2	Ĺ	TOTAL	-		OR	1 3 3 3	-	<u> </u>
						_		TOTAL	L		OR	TOTAL	Ľ	100
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALI	_ ENT	ΊΤΥ	OR	OTHE SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	TI	ADDI- ONAL FEE		RATE	T	ADDI- TIONAL FEE
	Total	*	Minus	**		=	1	X \$ 25 =	7		OR	X \$ 50 =	\dagger	
AME	Independent	*	Minus	***		=		X \$ 100 =		-	OR	X \$ 200 =	十	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =	†		OR	+ \$ 360 =	+	
							}	TOTAL ADDIT	+		OR	TOTAL ADDIT	╁	
		(Column 1)						,			'	FEE	<u></u>	
,		CLAIMS REMAINING AFTER AMENDMENT		(Column HIGHEST NUMBER PREVIOUS PAID FOR	LY	(Column 3) PRESENT EXTRA		RATE	TIO	DI- NAL	ſ	RATE	TI	ADDI- ONAL FEE
	Γotal	•	Minus	**		=	Ì	X \$ 25 =	 		OR	X \$ 50 =	 	-
ľ	ndependent	*	Minus	***		=	ľ	X \$ 100 =	 		or -	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						t	+ \$ 180 =			OR	+ \$ 360 =	_	\dashv
							_	TOTAL ADDIT.				OTAL ADDIT.		\dashv
								,				FEE		
· H	ne "Highest Nun he "Highest Nun	nn 1 is less than the nber Previously Paid nber Previously Paid ber Previously Paid I	For IN THIS SPA	ACE is less than	20,	enter "20".	the a	appropriate box	in colu	no 1.				